

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FIGHT FOR TOMORROW		FEC IDENTIFICATION NUMBER ▼ C C00549279	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Left Hand Design			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 26 / 2016		
Mailing Address 7233 Manchaca Rd No 37			Amount 649.50		
City Austin	State TX	Zip Code 78745	Transaction ID : SE.7219		
Purpose of Expenditure Design of Federal Mailer		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 26 / 2016		
Name of Federal Candidate ERIN HOUCHIN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		8452.80	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Left Hand Design			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 26 / 2016		
Mailing Address 7233 Manchaca Rd No 37			Amount 216.50		
City Austin	State TX	Zip Code 78745	Transaction ID : SE.7221		
Purpose of Expenditure Design of Federal Mailer		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 26 / 2016		
Name of Federal Candidate TREY HOLLINGSWORTH		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		8669.30	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	866.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MATT L MACKOWIAK

[Electronically Filed]

Date

MM / DD / YYYY
04 / 27 / 2016

Signature